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Title

Nursing home clinicians increased prescribing of all psychotropic medications for dementia symptoms over the pandemic

Priority 1 (Research Category)

Qualitative research

Presenters

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Abstract

CONTEXT: Staff shortages, loss of family/community supports, and isolation protocols have impeded nursing home (NH) dementia symptom management during Covid-19.

OBJECTIVE: To explore the impact of the COVID-19 pandemic on the medication and non-medication management of dementia symptoms by Virginia NH clinicians.

DESIGN/SETTING/ANALYSIS: Three iterative cross-sectional pilot surveys of Virginia NH clinicians recruited by phone calls and emails to every Virginia NH, geriatric centers, professional organizations, and colleagues. Participants engaged additional participants in a 'snowball' process. Surveys were <5 minutes, created with SurveyMonkey, web-based, and distributed by email. Initial content developed from clinical experience and pertinent literature, and honed via cognitive interviews. Succeeding surveys were based on analyses of data from the previous survey(s). Descriptive statistics and Mann-Whitney analyses were employed.

RESULTS: Surveys fielded November 2021, March 2022, and June 2022 respectively generated 23, 38, and 28 clinician responses, an email participation of approximately 5%. Almost all clinicians reported worsened symptoms of dementia in their patients, heightened demand for non-pharmacologic dementia management, and a sharp drop in ability to provide such care due to lack of staff and families/volunteers. About half of clinicians reported increased antidepressant use, while up to 26% and 16%, respectively, described using more antipsychotics and unmonitored anti-epileptic medications. In a marked change from previous research, nearly all clinicians reported using anti-epileptic medications (86-95%) and antipsychotics (89-100%) for dementia symptoms. Benzodiazepines, anxiolytics, and sedative-hypnotic use increased <10%. While almost all (96%) participants reported NH expectations of the need to maintain care excellence despite increased needs and decreased resources, only 17-18% noted nursing home support for stress/burnout.

CONCLUSIONS: Pilot surveys of Virginia NH clinicians revealed that over the pandemic patient care needs increased as resources dwindled, resulting in use of more medications and less non-pharmacologic care. All classes of psychotropic medications increased, with greatest increases in antidepressant use. Both unmonitored anti-epileptic medications and antipsychotics were prescribed by most clinicians. Nursing home support for clinician stress/burnout was rare. Further research is needed to clarify these issues.